

ATTACHMENT A

**Council on Postsecondary Education
Endowment Match Program
Match Request Form**

Please complete a separate form for each endowment account for which matching funds are requested. Attach supporting documentation, including notices of board approval, check photocopies, and donor gift agreements.

Institution

Request Date

Title of Endowment

1. Is this a new endowment or an expansion of an existing endowment?

☐ New

☐ Existing

____/____/____
(Date established)

2. What activity will this endowment support? (Please check all that apply)

Quantity

Activity

- ☐ Chair(s)
☐ Professorship(s)
☐ Endowed Scholar(s)
☐ Research Staff Position(s)
☐ Graduate Fellowship
☐ Undergraduate Scholarship
☐ Research Infrastructure Project(s)
☐ Mission Support Project(s)

3. For what college, school, center, or department will the investment earnings be expended?

Organizational Unit

4. What academic program or programs will be supported by the endowment?
(Please provide Classification of Instructional Program code and description.
The list of active program CIP codes is available on the Council's Web site at
<http://www.cpe.ky.gov/research/endowment.>)

Program Code

Program Description

5. Which of the following areas of emphasis in the new economy will be supported by this endowment?

(Please check only one)

- ☐ Human health and development
- ☐ Biosciences
- ☐ Materials science and advanced manufacturing
- ☐ Information technologies and communications
- ☐ Environmental and energy technologies
- ☐ None of the above

6. Which of the following outcomes are expected from the endowment?

(Please check all that apply)

- ☐ Create new businesses that increase the number of good jobs in Kentucky.
- ☐ Create a critical mass of scholars who can influence the national research agenda.
- ☐ Promote interdisciplinary, problem solving, or applied research activities.
- ☐ Establish partnerships in the technologies, engineering, and applied sciences.
- ☐ Other _____

(Please specify)

7. In the space below, please provide the following information on each donor: the date the gift or pledge was received; the total amount of the gift and pledge; amount of cash received; pledge amount; pledge payment schedule; and the final pledge payment due date. Use additional pages if necessary.

Donor Name ¹	Date Gift or Pledge Received	Gift or Pledge Amount	Amount of Cash Received	Pledge Amount	Pledge Payment Schedule ²	Final Pledge Payment ³ Date
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

¹ Substitute the word "anonymous" if the donor requests confidentiality.

² Indicate whether pledge payments are expected monthly, quarterly, semi-annually, annually, or lump sum.

³ Indicate the month and year when the pledge will be paid in full.